

OFFICE OF EMERGENCY MEDICAL SERVICES
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CHRIS CHRISTIE
Governor

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KIM GUADAGNO Lt. Governor www.nj.gov/health

CATHLEEN D. BENNETT Commissioner

NEW JERSEY DEPARTMENT OF HEALTH OFFICE OF EMERGENCY MEDICAL SERVICES LOGON/ELECTRONIC SIGNATURE AGREEMENT FOR LEARNING MANAGEMENT SYSTEMS

This agreement is hereby made on the date below. Between the New Jersey Department of Health Office of Emergency Medical Services (OEMS), hereinafter referred to as the Assignor, and the individual named below, hereinafter referred to as the Assignee. The Assignor and the Assignee are hereinafter referred to collectively as the parties.

Whereas, the OEMS has adopted the Learning Management Systems computer based system for managing various functions essential to maintaining a high-quality Emergency Medical Services education system, including, but not limited to, managing student education information, processing applications for course approval, and course monitoring.

Whereas, the OEMS wished to assign, and the Assignee wishes to receive, a unique logon/electronic signature code that will permit the Assignee to logon to the Learning Management System (www.njoemscert.com) and to electronically sign applications, course rosters, and other important electronic documents, the parties to this agreement hereby agree as follows.

Responsibilities of Assignor:

- 1. The Assignor hereby assigns to the recipient: ______(code), which shall be the Assignee's logon/electronic signature for purposes of using the Learning Management System to send official records and documents to the OEMS.
- 2. The Assignor shall accept the electronic signature of the Assignee the same as an actual written signature of the Assignee.
- 3. The Assignor shall revoke the logon/electronic signature herein granted in the event the Assignee fails to comply with the requirements set forth at N.J.A.C. 8:40, N.J.A.C. 8:40A, N.J.A.C. 8:41, and/or N.J.A.C. 8:41A, N.J.S.A. 26:2H-1, et seq., N.J.S.A. 26:2K-7, et seq., or any other applicable law.

Responsibilities of Assignee:

- 1. The Assignee accepts full responsibility for the use of the logon/electronic signature herein granted. The Assignee understands that the logon/electronic signature code is non-delegable and agrees not to disclose the code to any third party.
- 2. The Assignee understands and agrees that the OEMS shall accept any action take under the Assignee's logon/electronic signature as the action of the Assignee.
- 3. The Assignee understands and agrees that all student information is confidential and the Assignee further agrees not to disclose student information to any third party without the expressed written consent of the student and/or parent.

- 4. The Assignee understands and agrees that violation of any of the terms of this Logon/Electronic Signature Agreement shall be cause for revocation of the logon/electronic signature code and additional punitive action as provided for by administrative rule and/or law.
- 5. The Assignee understands and agrees that a certificate shall be provided to <u>ALL</u> students successfully completing the approved education program.
- 6. The Assignee understands and agrees that he/she shall document the completion status of all students possessing an EMS ID # starting with a 5, in the Learning Management System.
- 7. The Assignee understands and agrees that all new course submissions shall contain a course name, course outline, course time frame(s), course objectives, course instructor name(s) and credentials.
- 8. The Assignee understands and agrees that all course and class submissions shall be submitted in the Learning Management System at least 30 days prior to the desired date.
- 9. The Assignee understands and agrees that all classes shall be assigned a 9-digit class number and OEMS approval prior to offering CEU's

IN WITNESS, WHEREOF, the parties hereto have caused the agreement to be executed by the affixing of their signatures below.		
Assignee (Print Name)	Assignee (Email)	
Assignee (Signature)		Date
Assignee (SS#)	Assignee (DOB)	Assignee (Phone #)
Assignee (Mailing Address inclu	iding city, state, & zip code)	
Assignor (Print Name)	Assignor (Email)	
Assignor (Signature)		Date